

IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

IN RE: NATIONAL FOOTBALL
LEAGUE PLAYERS'
CONCUSSION INJURY
LITIGATION

No. 2:12-md-02323-AB
MDL No. 2323

THIS DOCUMENT RELATES TO
ALL ACTIONS

Hon. Anita J. Brody

**[PROPOSED] ORDER APPROVING CENTRALIZED PROCESS FOR
REPRESENTATIVE CLAIMANTS AND DERIVATIVE CLAIMANT
REPRESENTATIVES**

Considering the Unopposed Motion of Co-Lead Class Counsel for entry of an Order in aid of implementation of the NFL Concussion Settlement, pursuant to the Court's continuing and exclusive jurisdiction under Article XVII of the Settlement Agreement and the May 8, 2015 Amended Final Approval Order and Judgment, and being fully apprised and with the consent of Counsel for the NFL Parties, the Court hereby **GRANTS** the Motion and

IT IS ORDERED as follows:

1. *Defined Terms.* All capitalized terms used in this Order that are defined in the Settlement Agreement or in this Order have the same meanings given to them in the Settlement Agreement or this Order. In addition, "Derivative Claimant Representative" shall mean the authorized representative, as ordered by this Court or a court or other official of competent jurisdiction under applicable state law or as approved by the Claims Administrator in accordance with this Order, of a minor, legally incapacitated or incompetent Derivative Claimant.

2. *Representative Claimants of Deceased, Legally Incapacitated or Incompetent Retired NFL Football Players Under the Settlement Agreement.* The Claims Administrator is authorized to recognize as the Representative Claimant of a deceased, legally incapacitated or incompetent Retired NFL Football Player any person who submits documents establishing that the person has been ordered by a court or other official of competent jurisdiction under applicable state law as the representative of such Retired NFL Football Player, in accordance with Sections 2.1(eeee), 4.2(b)(i) and 4(c) of the Settlement Agreement.

3. *Additional Documents Evidencing Authority to Act on Behalf of a Deceased, Legally Incapacitated or Incompetent Retired NFL Football Player.* In addition to the documents specified in Sections 2.1(eeee) and 4.2(b)(i) of the Settlement Agreement, the Claims Administrator may accept a durable or springing power of attorney agreement as proof of a

Representative Claimant's authority to act on behalf of a legally incapacitated or incompetent Retired NFL Football Player. To be sufficient, the power of attorney must name the Representative Claimant as agent for the Retired NFL Football Player, be properly executed and still be in effect at the time of registration.

4. Approval of Additional Documents Evidencing Authority to Act on Behalf of a Deceased, Legally Incapacitated or Incompetent Retired NFL Football Player. The Parties have discretion to approve jointly additional documents the Claims Administrator may accept as proof of a Representative Claimant's authority to act on behalf of a deceased, legally incapacitated or incompetent Retired NFL Football Player. The Parties and Claims Administrator may implement such approvals without further order of this Court.

5. Process for Appointment of Representative Claimants on Behalf of Deceased, Legally Incapacitated or Incompetent Retired NFL Football Players. The Claims Administrator is authorized to assist proposed Representative Claimants attempting to register on or before the Registration Deadline or seeking to substitute themselves as Representative Claimants for Settlement Class Members who timely registered to obtain approval to act on behalf of deceased, legally incapacitated or incompetent Retired NFL Football Players through a centralized process in this Court if they do not already possess court appointment documents. To participate, a proposed Representative Claimant must submit to the Claims Administrator:

- (a) A Petition for Appointment of Representative Claimant, on a form provided by the Claims Administrator (the "Representative Claimant Petition");¹
- (b) A completed Representative Claimant Declaration appropriate to the type of Representative Claimant;²
- (c) Documents evidencing that the Retired NFL Football Player is deceased, legally incapacitated or incompetent; and
- (d) Documents supporting the Representative Claimant's claimed basis for authority to act on behalf of the Retired NFL Football Player.³

After receiving these required documents, the Claims Administrator shall submit the Representative Claimant Petition and supporting documents to the Court, or its designee, seeking appointment of the Representative Claimant. If the Representative Claimant Petition is granted,⁴ the Claims Administrator shall recognize the person identified as the authorized Representative Claimant of the Retired NFL Football Player and shall issue a Notice of Registration Determination advising the Representative Claimant of his or her registration status. If the Representative Claimant Petition is denied for any reason, the Claims Administrator shall advise

¹ Exhibit A is a form of the Representative Claimant Petition.

² Exhibits B and C are copies of the Proposed Representative Claimant Declaration for Deceased Players and for Legally Incapacitated or Incompetent Players, respectively.

³ Exhibit D includes a list of the types of documents that may be submitted as a Representative Claimant's basis of authority.

⁴ Exhibit E is a form of proposed order granting a Representative Claimant Petition.

the proposed Representative Claimant of that determination and work with those affected to determine the appropriate next steps.

6. *Recognition of Representative Claimants.* The Claims Administrator, the BAP Administrator and the Lien Resolution Administrator are authorized to recognize as the authorized Representative Claimant of a deceased, legally incapacitated or incompetent Retired NFL Football Player the person whose authority has been established in accordance with this Order.

7. *Approval of Awards.* Any final Monetary Award or Supplemental Monetary Award the Claims Administrator shall determine and award to or on behalf of a deceased, legally incapacitated or incompetent Retired NFL Football Player in accordance with the Settlement Agreement is approved as fair, reasonable and adequate.

8. *Authority to Pay Representative Claimants.* The Claims Administrator may pay any Monetary Award or Supplemental Monetary Award to the Representative Claimant of such Retired NFL Football Player without requiring additional court approvals or other documents under Section 9.3(b) of the Settlement Agreement.

9. *Appointed Derivative Claimant Representatives.* The Claims Administrator is authorized to recognize as the Derivative Claimant Representative of a minor, legally incapacitated or incompetent Derivative Claimant any person who submits documents establishing that the person has been ordered by a court or other official of competent jurisdiction under applicable state law as the representative of such Derivative Claimant.

10. *Documents Evidencing Authority to Act on Behalf of a Minor, Legally Incapacitated or Incompetent Derivative Claimant.* In addition to the documents specified in Section 9.4(b) of the Settlement Agreement, the Claims Administrator may accept:

- (a) A durable or springing power of attorney agreement as proof of a Derivative Claimant Representative's authority to act on behalf of a legally incapacitated or incompetent Derivative Claimant. To be sufficient, the power of attorney must name the Derivative Claimant Representative as agent for the Derivative Claimant, be properly executed and still be in effect at the time of registration.
- (b) A birth certificate or baptismal certificate identifying the Derivative Claimant Representative as parent of a minor Derivative Claimant as proof of a Derivative Claimant Representative's authority to act on behalf of the Derivative Claimant. To be sufficient, the Derivative Claimant Representative's parental rights must not have been terminated.

11. *Approval of Additional Documents Evidencing Authority to Act on Behalf of a Minor, Legally Incapacitated or Incompetent Derivative Claimant.* The Parties have discretion to approve jointly additional documents the Claims Administrator may accept as proof of a Derivative Claimant Representative's authority to act on behalf of a minor, legally incapacitated or incompetent Derivative Claimant. The Parties and Claims Administrator may implement such approvals without further order of this Court.

12. *Process for Appointment of Derivative Claimant Representatives on Behalf of Minors, Legally Incapacitated or Incompetent Derivative Claimants.* The Claims Administrator is authorized to assist proposed Derivative Claimant Representatives to obtain approval to act on behalf of minor, legally incapacitated or incompetent Derivative Claimants through a centralized process in this Court if they do not already possess court appointment documents. To participate, a proposed Derivative Claimant Representative must submit to the Claims Administrator:

- (a) A Petition for Appointment of Derivative Claimant Representative, on a form provided by the Claims Administrator (the “Derivative Claimant Representative Petition”);⁵
- (b) A completed Derivative Claimant Representative Declaration appropriate to the type of Derivative Claimant Representative;⁶
- (c) Documents evidencing that the Derivative Claimant is a minor, legally incapacitated or incompetent; and
- (d) Documents supporting the Derivative Claimant Representative’s claimed basis for authority to act on behalf of the Derivative Claimant.⁷

After receiving these required documents, the Claims Administrator shall submit the Derivative Claimant Representative Petition and supporting documents to the Court, or its designee, seeking appointment of the Derivative Claimant Representative. If the Derivative Claimant Representative Petition is granted,⁸ the Claims Administrator shall recognize the person identified as the Derivative Claimant Representative of the Derivative Claimant and shall pay the Derivative Claimant Award to the Derivative Claimant Representative. If the Petition is denied for any reason, the Claims Administrator shall advise the proposed Derivative Claimant Representative of that determination and work with those affected to determine the appropriate next steps.

13. *Recognition of Derivative Claimant Representatives.* The Claims Administrator, the BAP Administrator and the Lien Resolution Administrator are authorized to recognize as the authorized Derivative Claimant Representative of a minor, legally incapacitated or incompetent Derivative Claimant the person whose authority has been established in accordance with this Order.

14. *Approval of Derivative Claimant Awards.* Any final Derivative Claimant Award amount the Claims Administrator shall determine and award to or on behalf of a minor, legally incapacitated or incompetent Derivative Claimant in accordance with the Settlement Agreement is approved as fair, reasonable and adequate.

15. *Authority to Pay Derivative Claimant Representative.* The Claims Administrator may pay a Derivative Claimant Award to the Derivative Claimant Representative of such

⁵ Exhibit F is a form of the Derivative Claimant Representative Petition.

⁶ Exhibits G and H are copies of the Proposed Derivative Claimant Representative Declaration for Minor Derivative Claimants and for Legally Incapacitated or Incompetent Derivative Claimants, respectively.

⁷ Exhibit I includes a list of the types of documents that may be submitted as a Derivative Claimant Representative’s basis of authority.

⁸ Exhibit J is a form of proposed order granting a Derivative Claimant Representative Petition.

Derivative Claimant without requiring additional court approvals or other documents under Section 9.4(b) of the Settlement Agreement.

16. *Requirement to Abide by State Law.* Each Representative Claimant shall abide by all substantive laws of the applicable Retired NFL Football Player's state of domicile or any other applicable law concerning the compromise and distribution of any Monetary Award or Supplemental Monetary Award. Each Derivative Claimant Representative shall abide by all substantive laws of the applicable Derivative Claimant's state of domicile or any other applicable law concerning the compromise and distribution of any Derivative Claimant Award.

17. *Indemnification.* Each Representative Claimant and Derivative Claimant Representative shall indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to his or her actions in connection with the NFL Concussion Settlement program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

18. *Implementation of this Order.* The Claims Administrator may develop and maintain any internal policies and procedures necessary to implement this Order.

19. *Exclusive Retained Jurisdiction.* This Court retains continuing and exclusive jurisdiction over the interpretation, implementation, and enforcement of this Order.

SIGNED AND ENTERED this _____ day of _____, 2017.

Honorable Anita B. Brody
United States District Judge

Exhibit A

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

IN RE: NATIONAL FOOTBALL
LEAGUE PLAYERS'
CONCUSSION INJURY
LITIGATION

No. 2:12-md-02323-AB
MDL No. 2323

THIS DOCUMENT RELATES TO
ALL ACTIONS

Hon. Anita J. Brody

PETITION FOR APPOINTMENT OF REPRESENTATIVE CLAIMANT

I, [Name of proposed Representative Claimant], respectfully move this Court for appointment as the Representative Claimant authorized to act on behalf of [Name of Retired NFL Football Player], a [deceased, legally incapacitated or incompetent] Retired NFL Football Player, in connection with the NFL Concussion Settlement as follows:

1. I seek appointment as the Representative Claimant to act on behalf of the Retired NFL Football Player [and his estate, heirs, and beneficiaries] but have not been appointed to act in that capacity by a court or other official of competent jurisdiction and do not have such other proof of representative capacity that the Claims Administrator has been authorized by the Court or the Parties to accept.

2. To establish my authority to act as the Representative Claimant, I submit and incorporate in this Petition the Representative Claimant Declaration and supporting documents attached as Exhibit A.

3. I have confirmed with the Claims Administrator that it has not received documents or information indicating that any other individual or entity is appointed or is seeking appointment as the Representative Claimant on behalf of the Retired NFL Football Player.

4. Accordingly, I respectfully request that the Court enter an order approving this Petition.

5. A proposed order accompanies this Petition.

Respectfully submitted,

[REPRESENTATIVE CLAIMANT]

By: _____
[Lawyer/Representative Claimant Name]
[Lawyer for] Representative Claimant
[Law Firm, if applicable]
[Street Address]
[City, State, Zip Code]
[Phone Number]

Date: _____

Exhibit B

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

RC001	PROPOSED REPRESENTATIVE CLAIMANT DECLARATION: DECEASED RETIRED NFL FOOTBALL PLAYER		
<p>A person who has not been appointed as the authorized representative of a deceased Retired NFL Football Player ("Player") by a court or other official of competent jurisdiction under applicable state law, and who cannot submit to the Claims Administrator such other proof of representative capacity that the Claims Administrator has been authorized by the Court or the Parties to accept, must complete and submit this Declaration in support of his or her Petition for Appointment as Representative Claimant on behalf of the Player and/or his estate, heirs, and beneficiaries in connection with the NFL Concussion Settlement program.</p>			
I. PLAYER INFORMATION			
Name	First Name	M.I.	Last Name
Settlement Program ID	<input type="text"/>		
Player's Social Security Number	<input type="text"/>		Date of Death <input type="text"/> / <input type="text"/> / <small>(Month/Day/Year)</small>
Player's Residence Address at Time of Death	<input type="text"/> Street <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code		
II. PROPOSED REPRESENTATIVE CLAIMANT INFORMATION			
Name	First Name	M.I.	Last Name
Proposed Representative Claimant's Social Security Number	<input type="text"/>		
Proposed Representative Claimant's Address	<input type="text"/> Street <input type="text"/> City <input type="text"/> State <input type="text"/> Zip Code		
Relationship to Player			
Basis of Authority to Act for Player			
List All Document(s) Submitted Evidencing the Basis for Your Authority (attach additional sheets, if needed)			
III. PROPOSED REPRESENTATIVE CLAIMANT CERTIFICATION			
<p>This Declaration is an official document submitted in connection with the Class Action Settlement in <i>In re: National Football League Players' Concussion Injury Litigation</i>, MDL No. 2323. By signing this Declaration, I certify and declare under penalty of perjury pursuant to 28 U.S.C. Section 1746 that:</p>			

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

- (a) I have authority to act on behalf of the Player and his estate, heirs, and beneficiaries in connection with the NFL Concussion Settlement program (the "Program"), including with respect to the submission of materials to register for the Program, the filing of any Claim Packages for Monetary Awards, and the receipt of payment for any Monetary Awards.
- (b) I will abide by all substantive laws of the Player's last state of domicile concerning the compromise and distribution of any Monetary Award or Supplemental Monetary Award to the appropriate heirs or other beneficiaries and any other parties with any right to receive any portion of any payments.
- (c) I will notify the Claims Administrator promptly if my authority to act is curtailed, surrendered, withdrawn, or terminated.
- (d) I am not aware of any objections to my appointment and service as the Representative Claimant on behalf of the Player and his estate, heirs, and beneficiaries.
- (e) I will indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to my actions in connection with the Program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

The information I have provided in this Declaration is true and correct. I understand that the Claims Administrator and Court will rely on this Declaration and false statements or claims made in connection with this Declaration may result in fines, imprisonment, and/or any other remedy available by law to the federal government.

IV. PROPOSED REPRESENTATIVE CLAIMANT SIGNATURE

Signature	_____	Date	/ / (Month/Day/Year)
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V. HOW TO SUBMIT THIS DECLARATION

Complete this Declaration fully, sign it, and submit it to the Claims Administrator using one of the methods below. If you have not already done so, you must also submit: (1) a completed Petition for Appointment of Representative Claimant; (2) documents evidencing that the Player is deceased; and (3) all documents you identified in Section II as supporting your authority to serve as the proposed Representative Claimant.

By Mail:	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260
By Delivery:	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

VI. How to Contact Us with Questions or for Help

If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions about this Declaration or need help, contact us at 1-855-887-3485 or send an email to ClaimsAdministrator@NFLConcussionSettlement.com. If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.

Exhibit C

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

RC002	PROPOSED REPRESENTATIVE CLAIMANT DECLARATION: LEGALLY INCAPACITATED OR INCOMPETENT RETIRED NFL FOOTBALL PLAYER		
<p>A person who has not been appointed as the authorized representative of a legally incapacitated or incompetent Retired NFL Football Player ("Player") by a court or other official of competent jurisdiction under applicable state law, and who cannot submit to the Claims Administrator such other proof of representative capacity that the Claims Administrator has been authorized by the Court or the Parties to accept, must complete and submit this Declaration in support of his or her Petition for Appointment as Representative Claimant on behalf of the Player in connection with the NFL Concussion Settlement program.</p>			
I. PLAYER INFORMATION			
Name	First Name	M.I.	Last Name
Settlement Program ID	_____		
Player's Social Security Number	_____ - _____ - _____		
Player's Residence Address	Street		
	City	State	Zip Code
II. PROPOSED REPRESENTATIVE CLAIMANT INFORMATION			
Name	First Name	M.I.	Last Name
Proposed Representative Claimant's Social Security Number	_____ - _____ - _____		
Proposed Representative Claimant's Address	Street		
	City	State	Zip Code
Relationship to Player			
Basis of Authority to Act for Player			
List All Document(s) Submitted Evidencing the Basis for Your Authority (attach additional sheets, if needed)			
III. PROPOSED REPRESENTATIVE CLAIMANT CERTIFICATION			
<p>This Declaration is an official document submitted in connection with the Class Action Settlement in <i>In re: National Football League Players' Concussion Injury Litigation</i>, MDL No. 2323. By signing this Declaration, I certify and declare under penalty of perjury pursuant to 28 U.S.C. Section 1746 that:</p>			
<p>(a) I have authority to act on behalf of the Player in connection with the NFL Concussion Settlement program (the "Program"), including with respect to the submission of materials to register for the Program, the decision to participate</p>			

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

in the Baseline Assessment Program (where applicable), the filing of any Claim Packages for Monetary Awards, and the receipt of payment for any Monetary Awards.

- (b) I will abide by all substantive laws of the Player's state of domicile concerning the compromise and distribution of any Monetary Award or Supplemental Monetary Award.
- (c) I will notify the Claims Administrator promptly if my authority to act is curtailed, surrendered, withdrawn, or terminated.
- (d) I am not aware of any objections to my appointment and service as Representative Claimant on behalf of the Player.
- (e) I will indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to my actions in connection with the Program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

The information I have provided in this Declaration is true and correct. I understand that the Claims Administrator and Court will rely on this Declaration and false statements or claims made in connection with this Declaration may result in fines, imprisonment, and/or any other remedy available by law to the federal government.

IV. PROPOSED REPRESENTATIVE CLAIMANT SIGNATURE

Signature	<hr/>	Date	/ / (Month/Day/Year)
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V. HOW TO SUBMIT THIS DECLARATION

Complete this Declaration fully, sign it, and submit it to the Claims Administrator using one of the methods below. If you have not already done so, you must also submit: (1) a completed Petition for Appointment of Representative Claimant; (2) documents evidencing that the Player is legally incapacitated or incompetent; and (3) all documents you identified in Section II as supporting your authority to serve as the proposed Representative Claimant.

By Mail:	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260
By Delivery:	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231

VI. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP

If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions about this Declaration or need help, contact us at 1-855-887-3485 or send an email to ClaimsAdministrator@NFLConcussionSettlement.com. If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.

Exhibit D

DOCUMENTS REQUIRED FOR APPOINTMENT OF REPRESENTATIVE CLAIMANT

A proposed Representative Claimant who does not have proof of appointment by a court or other official of competent jurisdiction under applicable state law to be the authorized representative of a deceased, legally incapacitated or incompetent Retired NFL Football Player, and who cannot submit to the Claims Administrator such other proof of representative capacity that the Claims Administrator has been authorized by the Court or the Parties to accept, may seek appointment and authority to act from the Court supervising the Settlement by submitting a Petition to that Court. The proposed Representative Claimant also must submit certain supporting documents, as follows.

A. Deceased Retired NFL Football Player.

An individual seeking appointment to act as the Representative Claimant on behalf of a Retired NFL Football Player who is deceased must submit:

1. A completed Proposed Representative Claimant Registration Declaration for a deceased Retired NFL Football Player, on a form provided by the Claims Administrator;
2. A death certificate, medical records, or other document(s) evidencing that the Retired NFL Football Player is deceased; and
3. Documents supporting the proposed Representative Claimant's claimed basis for authority to act on behalf of the deceased Retired NFL Football Player and his estate, heirs and beneficiaries, the sufficiency of which will be determined by the Court, such as:
 - (a) A trust agreement or certification of trust signed by the Retired NFL Football Player identifying the proposed Representative Claimant as trustee.
 - (b) A small estate affidavit signed by the proposed Representative Claimant.
 - (c) An affidavit of heirship, affidavit of surviving spouse or next of kin, or Successor-in-Interest pleading.
 - (d) The will of the Retired NFL Football Player identifying the proposed Representative Claimant as executor or an heir.
 - (e) A marriage, death or birth certificate identifying the proposed Representative Claimant's relationship to the Retired NFL Football Player.

- (f) A power of attorney agreement signed by the Retired NFL Football Player and naming the proposed Representative Claimant as his agent.
- (g) A healthcare directive, advanced medical directive, or living will signed by the Retired NFL Football Player and authorizing the proposed Representative Claimant to make decisions on his behalf.
- (h) Evidence that the proposed Representative Claimant has assumed legal or financial responsibility for the Retired NFL Football Player, such as payment of funeral expenses.
- (i) Any other documents the proposed Representative Claimant wishes to offer as the basis for his or her authority to act on behalf of the Retired NFL Football Player and his estate, heirs and beneficiaries.

B. Legally Incapacitated or Incompetent Retired NFL Football Player.

An individual seeking appointment as the Representative Claimant on behalf of a Retired NFL Football Player who is legally incapacitated or incompetent must submit:

1. A completed Proposed Representative Claimant Registration Declaration for a legally incapacitated or incompetent Retired NFL Football Player, on a form provided by the Claims Administrator;
2. Medical records or other document(s) evidencing that the Retired NFL Football Player is legally incapacitated or incompetent; and
3. Documents supporting the proposed Representative Claimant's claimed basis for authority to act on behalf of the Retired NFL Football Player, the sufficiency of which will be determined by the Court, such as:
 - (a) A general or special power of attorney agreement signed by the Retired NFL Football Player and naming the proposed Representative Claimant as his agent.
 - (b) A medical power of attorney, healthcare directive, advanced medical directive, or living will signed by the Retired NFL Football Player and authorizing the proposed Representative Claimant to make decisions on his behalf.
 - (c) A marriage, death or birth certificate identifying the proposed Representative Claimant's relationship to the Retired NFL Football Player.
 - (d) The will of the Retired NFL Football Player identifying the proposed Representative Claimant as executor or an heir.

- (e) Evidence that the proposed Representative Claimant has assumed legal or financial responsibility, including custody, care, or support, of the Retired NFL Football Player, such as payment of living or medical expenses.
- (f) Any other documents the proposed Representative Claimant wishes to offer as the basis for his or her authority to act on behalf of the Retired NFL Football Player.

Exhibit E

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

IN RE: NATIONAL FOOTBALL
LEAGUE PLAYERS'
CONCUSSION INJURY
LITIGATION

No. 2:12-md-02323-AB
MDL No. 2323

THIS DOCUMENT RELATES TO
ALL ACTIONS

Hon. Anita J. Brody

ORDER APPOINTING REPRESENTATIVE CLAIMANT

Before the Court is the Petition of [Name of proposed Representative Claimant] for appointment as the Representative Claimant authorized to act on behalf of [Name of Retired NFL Football Player], a [deceased, legally incapacitated or incompetent] Retired NFL Football Player, in connection with the NFL Concussion Settlement. The Court hereby **GRANTS** the Petition, and **ORDERS** as follows:

1. [Name of proposed Representative Claimant] is appointed as the Representative Claimant on behalf of [Name of Retired NFL Football Player] [and his estate, heirs, and beneficiaries] in connection with the NFL Concussion Settlement program (the “Program”).
2. The Representative Claimant is authorized to act on behalf of the Retired NFL Football Player, including the submission of materials to register for the Program, the decision to participate in the Baseline Assessment Program (where applicable), the filing of any Claim Packages for Monetary Awards, and the receipt of payment for any Monetary Awards.
3. The Claims Administrator, BAP Administrator and Lien Resolution Administrator shall accept this Order as proof of the Representative Claimant’s appointment.

4. Any final Monetary Award or Supplemental Monetary Award amount the Claims Administrator shall determine and award to or on behalf of the Retired NFL Football Player in accordance with the Settlement Agreement is approved as fair, reasonable and adequate.

5. The Claims Administrator shall pay the Monetary Award or Supplemental Monetary Award amount to the Representative Claimant.

6. The Representative Claimant shall abide by all substantive laws of the applicable Retired NFL Football Player's state of domicile or any other applicable state law concerning the compromise and distribution of any Monetary Award or Supplemental Monetary Award.

7. The Representative Claimant shall indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to his or her action in connection with the Program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

8. The Representative Claimant shall immediately notify the Claims Administrator if his or her authority is curtailed, surrendered, withdrawn, or terminated.

SIGNED AND ENTERED this ____ day of _____, ____.

Honorable Anita B. Brody
United States District Judge

Exhibit F

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

IN RE: NATIONAL FOOTBALL
LEAGUE PLAYERS'
CONCUSSION INJURY
LITIGATION

No. 2:12-md-02323-AB
MDL No. 2323

THIS DOCUMENT RELATES TO
ALL ACTIONS

Hon. Anita J. Brody

PETITION FOR APPOINTMENT OF DERIVATIVE CLAIMANT REPRESENTATIVE

I, [Name of proposed Derivative Claimant Representative], respectfully move this Court for appointment as the Derivative Claimant Representative authorized to act on behalf of [Name of Derivative Claimant], a [minor, legally incapacitated or incompetent] Derivative Claimant of [Name of Retired NFL Football Player], a Retired NFL Football Player, in connection with the NFL Concussion Settlement as follows:

1. I seek appointment as the Derivative Claimant Representative to act on behalf of the Derivative Claimant but have not been appointed to act in that capacity by a court or other official of competent jurisdiction and do not have such other proof of representative capacity the Claims Administrator has been authorized by the Court or the Parties to accept.

2. To establish my authority to act as the Derivative Claimant Representative, I submit and incorporate in this Petition the Derivative Claimant Representative Declaration and supporting documents attached as Exhibit A.

3. I have confirmed with the Claims Administrator that it has not received documents or information indicating that any other individual or entity is appointed or is seeking appointment as the Derivative Claimant Representative on behalf of the Derivative Claimant.

4. Accordingly, I respectfully request that the Court enter an order approving this Petition.

5. A proposed order accompanies this Petition.

Respectfully submitted,

**[DERIVATIVE REPRESENTATIVE
CLAIMANT]**

By: _____
[Lawyer/Derivative Claimant Representative Name]
[Lawyer for] Derivative Claimant Representative
[Law Firm, if applicable]
[Street Address]
[City, State, Zip Code]
[Phone Number]

Date: _____

Exhibit G

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

RC004	PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE DECLARATION: MINOR DERIVATIVE CLAIMANT		
<p>A person who has not been appointed as the authorized representative of a minor Derivative Claimant of a Retired NFL Football Player ("Player") by a court or other official of competent jurisdiction under applicable state law, and who cannot submit to the Claims Administrator such other proof of representative capacity the Claims Administrator has been authorized by the Court or the Parties to accept, must complete and submit this Declaration in support of his or her Petition for Appointment as Derivative Representative Claimant on behalf of the Derivative Claimant of the Player in connection with the NFL Concussion Settlement program.</p>			
I. PLAYER INFORMATION			
Name	First Name	M.I.	Last Name
Settlement Program ID	<input type="text"/>		
Player's Social Security Number	<input type="text"/>		
Player's Residence Address	Street		
	City	State	Zip Code
II. DERIVATIVE CLAIMANT INFORMATION			
Name	First Name	M.I.	Last Name
Settlement Program ID	<input type="text"/>	Date of Birth	<input type="text"/> / <input type="text"/> / <input type="text"/> (Month/Day/Year)
Derivative Claimant's Social Security Number	<input type="text"/>		
Derivative Claimant's Address	Street		
	City	State	Zip Code
Relationship to Player			
III. PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE INFORMATION			
Name	First Name	M.I.	Last Name
Proposed Derivative Claimant Representative's Social Security Number	<input type="text"/>		
Proposed Derivative Claimant Representative's Address	Street		
	City	State	Zip Code
Relationship to Derivative Claimant			

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

Basis of Authority to Act for Derivative Claimant	
List All Document(s) Submitted Evidencing the Basis for Your Authority (attach additional sheets, if needed)	

IV. PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE CERTIFICATION

This Declaration is an official document submitted in connection with the Class Action Settlement in *In re: National Football League Players' Concussion Injury Litigation, MDL No. 2323*. By signing this Declaration, I certify and declare under penalty of perjury pursuant to 28 U.S.C. Section 1746 that:

- (a) I have authority to act on behalf of the Derivative Claimant in connection with the NFL Concussion Settlement program (the "Program"), including with respect to the submission of materials to register for the Program, the filing of any Derivative Claim Packages for Derivative Claimant Awards, and the receipt of payment for any Derivative Claimant Awards.
- (b) I will abide by all substantive laws of the Derivative Claimant's state of domicile concerning the compromise and distribution of any Derivative Claimant Award.
- (c) I will notify the Claims Administrator promptly if my authority to act is curtailed, surrendered, withdrawn, or terminated.
- (d) I am not aware of any objections to my appointment and service as the Derivative Claimant Representative on behalf of the Derivative Claimant.
- (e) I will indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to my actions in connection with the Program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

The information I have provided in this Declaration is true and correct. I understand that the Claims Administrator and Court will rely on this Declaration and false statements or claims made in connection with this Declaration may result in fines, imprisonment, and/or any other remedy available by law to the federal government.

V. PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE SIGNATURE

Signature	_____	Date	_____/_____/_____ (Month/Day/Year)
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VI. HOW TO SUBMIT THIS DECLARATION

Complete this Declaration fully, sign it, and submit it to the Claims Administrator using one of the methods below. If you have not already done so, you must also submit: (1) a completed Petition for Appointment of Derivative Claimant Representative; (2) documents evidencing that the Derivative Claimant is a minor; and (3) all documents you identified in Section II as supporting your authority to serve as the proposed Derivative Claimant Representative.

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

By Mail:	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260
By Delivery:	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231
VII. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP	
<p>If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions about this Declaration or need help, contact us at 1-855-887-3485 or send an email to ClaimsAdministrator@NFLConcussionSettlement.com. If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.</p>	

Exhibit H

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

RC003	PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE DECLARATION: LEGALLY INCAPACITATED OR INCOMPETENT DERIVATIVE CLAIMANT		
<p>A person who has not been appointed as the authorized representative of a legally incapacitated or incompetent Derivative Claimant of a Retired NFL Football Player ("Player") by a court or other official of competent jurisdiction under applicable state law, and who cannot submit to the Claims Administrator such other proof of representative capacity that the Claims Administrator has been authorized by the Court or the Parties to accept, must complete and submit this Declaration in support of his or her Petition for Appointment as Derivative Representative Claimant on behalf of the Derivative Claimant of the Player in connection with the NFL Concussion Settlement program.</p>			
I. PLAYER INFORMATION			
Name	First Name	M.I.	Last Name
Settlement Program ID	<input type="text"/>		
Player's Social Security Number	<input type="text"/>		
Player's Residence Address	Street		
	City	State	Zip Code
II. DERIVATIVE CLAIMANT INFORMATION			
Name	First Name	M.I.	Last Name
Settlement Program ID	<input type="text"/>		
Derivative Claimant's Social Security Number	<input type="text"/>		
Derivative Claimant's Address	Street		
	City	State	Zip Code
Relationship to Player			
III. PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE INFORMATION			
Name	First Name	M.I.	Last Name
Proposed Derivative Claimant Representative's Social Security Number	<input type="text"/>		
Proposed Derivative Claimant Representative's Address	Street		
	City	State	Zip Code
Relationship to Derivative Claimant			

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

Basis of Authority to Act for Derivative Claimant	
List All Document(s) Submitted Evidencing the Basis for Your Authority (attach additional sheets, if needed)	

IV. PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE CERTIFICATION

This Declaration is an official document submitted in connection with the Class Action Settlement in *In re: National Football League Players' Concussion Injury Litigation, MDL No. 2323*. By signing this Declaration, I certify and declare under penalty of perjury pursuant to 28 U.S.C. Section 1746 that:

- (a) I have authority to act on behalf of the Derivative Claimant in connection with the NFL Concussion Settlement program (the "Program"), including with respect to the submission of materials to register for the Program, the filing of any Derivative Claim Packages for Derivative Claimant Awards, and the receipt of payment for any Derivative Claimant Awards.
- (b) I will abide by all substantive laws of the Derivative Claimant's state of domicile concerning the compromise and distribution of any Derivative Claimant Award.
- (c) I will notify the Claims Administrator promptly if my authority to act is curtailed, surrendered, withdrawn, or terminated.
- (d) I am not aware of any objections to my appointment and service as the Derivative Claimant Representative on behalf of the Derivative Claimant.
- (e) I will indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to my actions in connection with the Program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

The information I have provided in this Declaration is true and correct. I understand that the Claims Administrator and Court will rely on this Declaration and false statements or claims made in connection with this Declaration may result in fines, imprisonment, and/or any other remedy available by law to the federal government.

V. PROPOSED DERIVATIVE CLAIMANT REPRESENTATIVE SIGNATURE

Signature	_____	Date	/ / (Month/Day/Year)
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VI. HOW TO SUBMIT THIS DECLARATION

Complete this Declaration fully, sign it, and submit it to the Claims Administrator using one of the methods below. If you have not already done so, you must also submit: (1) a completed Petition for Appointment of Derivative Claimant Representative; (2) documents evidencing that the Derivative Claimant is legally incapacitated or incompetent; and (3) all documents you identified in Section II as supporting your authority to serve as the proposed Derivative Claimant Representative.

NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION
No. 2:12-md-02323 (E.D. Pa.)

By Mail:	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260
By Delivery:	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231
VII. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP	
<p>If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions about this Declaration or need help, contact us at 1-855-887-3485 or send an email to ClaimsAdministrator@NFLConcussionSettlement.com. If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.</p>	

Exhibit I

**DOCUMENTS REQUIRED FOR APPOINTMENT
OF DERIVATIVE CLAIMANT REPRESENTATIVE**

A proposed Derivative Claimant Representative who does not have proof of appointment by a court or other official of competent jurisdiction under applicable state law to be the authorized representative of a minor, legally incapacitated or incompetent Derivative Claimant, and who cannot submit to the Claims Administrator such other proof of representative capacity the Claims Administrator has been authorized by the Court or the Parties to accept, may seek appointment and authority to act from the Court supervising the Settlement by submitting a Derivative Claimant Representative Petition to that Court. The proposed Derivative Claimant Representative also must submit certain supporting documents, as follows.

A. Minor Derivative Claimant.

An individual seeking appointment to act as the Derivative Claimant Representative on behalf of a Derivative Claimant who is a legal minor under the law of the state of the Derivative Claimant's domicile must submit:

1. A completed Proposed Derivative Claimant Representative Declaration for a minor Derivative Claimant, on a form provided by the Claims Administrator;
2. Documents supporting the proposed Derivative Claimant Representative's claimed basis for authority to act on behalf of the minor Derivative Claimant, the sufficiency of which will be determined by the Court, such as:
 - (a) Custody records indicating the Derivative Claimant Representative has legal custody of the Derivative Claimant.
 - (b) Evidence that the proposed Derivative Claimant Representative has assumed legal or financial responsibility, including custody, care, or support, of the Derivative Claimant, such as payment of living or medical expenses.
 - (c) Any other documents the proposed Derivative Claimant Representative wishes to offer as the basis for his or her authority to act on behalf of the Derivative Claimant.

B. Legally Incapacitated or Incompetent Derivative Claimant.

An individual seeking appointment as the Derivative Claimant Representative on behalf of a legally incapacitated or incompetent Derivative Claimant must submit:

1. A completed Proposed Derivative Claimant Representative Declaration for a legally incapacitated or incompetent Derivative Claimant, on a form provided by the Claims Administrator;
2. Medical records or other document(s) evidencing that the Derivative Claimant is legally incapacitated or incompetent; and
3. Documents supporting the proposed Derivative Claimant Representative's claimed basis for authority to act on behalf of the Derivative Claimant, the sufficiency of which will be determined by the Court, such as:
 - (a) A general or special power of attorney agreement signed by the Derivative Claimant and naming the proposed Derivative Claimant Representative as his or her agent.
 - (b) A medical power of attorney, healthcare directive, advanced medical directive, or living will signed by the Derivative Claimant and authorizing the proposed Derivative Claimant Representative to make decisions on his or her behalf.
 - (c) A marriage, death or birth certificate identifying the proposed Derivative Claimant Representative's relationship to the Derivative Claimant.
 - (d) The will of the Derivative Claimant identifying the proposed Derivative Claimant Representative as executor or an heir.
 - (e) Evidence that the proposed Derivative Claimant Representative has assumed legal or financial responsibility, including custody, care, or support, of the Derivative Claimant, such as payment of living or medical expenses.
 - (f) Any other documents the proposed Derivative Claimant Representative wishes to offer as the basis for his or her authority to act on behalf of the Derivative Claimant.

Exhibit J

**IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

IN RE: NATIONAL FOOTBALL
LEAGUE PLAYERS'
CONCUSSION INJURY
LITIGATION

No. 2:12-md-02323-AB
MDL No. 2323

THIS DOCUMENT RELATES TO
ALL ACTIONS

Hon. Anita J. Brody

ORDER APPOINTING DERIVATIVE CLAIMANT REPRESENTATIVE

Before the Court is the Petition of [Name of proposed Derivative Claimant Representative] for appointment as the Derivative Claimant Representative authorized to act on behalf of [Name of Derivative Claimant], a [minor, legally incapacitated or incompetent] Derivative Claimant of [Name of Retired NFL Football Player], a Retired NFL Football Player, in connection with the NFL Concussion Settlement. The Court hereby **GRANTS** the Petition, and **ORDERS** as follows:

1. [Name of proposed Derivative Claimant Representative] is appointed as the Derivative Claimant Representative on behalf of [Name of Derivative Claimant] in connection with the NFL Concussion Settlement program (the “Program”).
2. The Derivative Claimant Representative is authorized to act on behalf of the Derivative Claimant, including the submission of materials to register for the Program, the filing of any Derivative Claim Packages for Derivative Claimant Awards, and the receipt of payment for any Derivative Claimant Awards.
3. The Claims Administrator, BAP Administrator and Lien Resolution Administrator shall accept this Order as proof of the Derivative Claimant Representative’s appointment.

4. Any final Derivative Claimant Award amount the Claims Administrator shall determine and award to or on behalf of the Derivative Claimant in accordance with the Settlement Agreement is approved as fair, reasonable and adequate.

5. The Claims Administrator shall pay the Derivative Claimant Award amount to the Derivative Claimant Representative.

6. The Derivative Claimant Representative shall abide by all substantive laws of the applicable Derivative Claimant's state of domicile or any other applicable state law concerning the compromise and distribution of any Derivative Claimant Award.

7. The Derivative Claimant Representative shall indemnify and hold harmless the Released Parties, as defined in Section 2.1(bbbb) of the Settlement Agreement, and their attorneys and insurers, Class Counsel, Co-Lead Class Counsel, the Claims Administrator, the BAP Administrator, the Lien Resolution Administrator, the Special Masters, and the agents and representatives of any of the foregoing, from any and all claims, demands, or expenses of any kind arising out of or relating to his or her action in connection with the Program, including, without limitation, as set forth in Section 11.4 of the Settlement Agreement.

8. The Derivative Claimant Representative shall immediately notify the Claims Administrator if his or her authority is curtailed, surrendered, withdrawn, or terminated.

SIGNED AND ENTERED this ____ day of _____, ____.

Honorable Anita B. Brody
United States District Judge